FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

| | 1081814 |
|------------------|--|
| OME | APPROVAL |
| OMB Number: | 3235-007 |
| Expires: | May 31, 200 |
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| | 1 1 |

| Name of Offering (check if this is an ar | nendment and name has changed, and indica | e change.) | | |
|---|--|-------------------------------|----------------------|----------------------|
| Horizon Food Group, Inc. Private | Sale of Securities | | • | |
| Filing Under (Check box(es) that apply): | ☐ Rule 504 ☐ Rule 50 | 08 505 | tion 4(6) | ULOE |
| Type of Filing: New Filing | ☐ Amendment | | | |
| | A. BASIC IDENTI | FICATION DATA | | RECD S.E.C. |
| Enter the information requested about t | | | | |
| Name of Issuer (check if this is an am | endment and name has changed, and indicate | change.) | | 1 0 0000 |
| Horizon Food Group, Inc. | | | | JAN 1 0 2003 |
| Address of Executive Offices | (Number and Street, City. | State, Zip Code) Telepho | one Number (Includi | ng Area Code) |
| Three Embarcadero Center, Suite | 2360, San Francisco, CA 94111 | (4 | 15) 788-2000 | |
| Address of Principal Business Operations | (Number and Street, City, State, Zip Code) | Telepho | one Number (Includi | ng Area Code) |
| (if different from Executive Offices) | | | | <u> </u> |
| Brief Description of Business | | | | |
| Manufacture and distribute brand | ed name and private label products in the | e sweet snack food and gourme | t coffee categories | S. |
| | | , | | • |
| | | | | |
| | | | | |
| Type of Business Organization | | | | |
| □ corporation | limited partnership, already for | ned 🔲 otho | er (please specify): | |
| ■ business trust | limited partnership, to be forme | d | | |
| | Month | Year | | |
| Actual or Estimated Date of Incorporation | or Organization: 02 | 1999 | | □ Estimate PROCESSED |
| Jurisdiction of Incorporation or Organizati | on: (Enter two-letter U.S. Postal Service ab | breviation for State: | _ | |
| , | CN for Canada: FN for other for | | DE | 1 |
| | *** | | DL. | |

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 eFINANCIAL 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02) 1 of 8

| | | A. BASIC IDENTII | FICATION DATA | | |
|--|---|--|--|------------|---------------------------------|
| Each beneficial own the issuer; | te issuer, if the issuer ner having the powe cer and director of co | r has been organized within r to vote or dispose, or dire orporate issuers and of corp | the past five years; ct the vote or disposition of, orate general and managing p | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | | ☑ Director | General and/or Managing Partner |
| Full Name (Last name first, if i | ndividual) | | | | ivianaging raitiici |
| Shorin, James M. | 011 | O't. Co. 7' (C. 1) | | | |
| Business or Residence Address c/o Horizon Holdings. I | | · · · · · · · · · · · · · · · · · | 60, San Francisco, CA 94 | 4111 | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ⊠ Executive Officer | □ Director | General and/or Managing Partner |
| Full Name (Last name first, if i Estes, Phillip S. | ndividual) | | | | |
| Business or Residence Address c/o Horizon Holdings, l | • | | 60, San Francisco, CA 94 | 4111 | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☑ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, if i Rucker, Lee M. | ndividual) | | | | |
| Business or Residence Address c/o Horizon Food Grou | | | 2360, San Franciso, CA | 94111 | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | □ Director | General and/or Managing Partner |
| Full Name (Last name first, if i | ndividual) | | | | |
| McLane Jr., Drayton Business or Residence Address | Number and Street | t City State Zin Code) | | | |
| | | evard, Temple, TX 765 | 04 | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | ☑ Director | General and/or Managing Partner |
| Full Name (Last name first, if i Wheeler, Larry G. | ndividual) | | | | |
| Business or Residence Address 6904 Baltusrol Road, F | | | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☑ Director | General and/or Managing Partner |
| Full Name (Last name first, if i Sanford Jr., G.W. | ndividual) | | | | |
| Business or Residence Address 2715 Forrester Road, T | | | | | |
| Check Box(es) that Apply: | Promoter | ■ Beneficial Owner | Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, if i Cutie Pie Partners, L.P. | · | | | | |
| Business or Residence Address c/o Horizon Food Grou | • | | 2360, San Francisco, CA | 94111 | |
| Check Box(es) that Apply: | Promoter | ☑ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, if i Coffee Partners, L.P. | ndividual) | | | | |
| Business or Residence Address | • | | | 0.4444 | |
| c/o Horizon Food Grou | p, Inc., Three Em | barcadero Center, Suite | 2360, San Francisco, CA | 94111 | |

| | | | | В. 1 | NFORMAT | TION ABO | UT OFFER | ING | | | | |
|--------------------|---|--|--|---|-------------------------------|-----------------------------|-----------------------------|-------------------|---|------------------------|-----------------|--------------|
| | | | | | | | | | | | Yes | No |
| 1. Has the | issuer sold, | or does the | issuer intend | | | | | - | | •••••••• | | \boxtimes |
| | | | | | o in Append | | _ | | | | | |
| 2. What is | the minimu | m investmei | nt that will b | e accepted fi | rom any indi | vidual? | ••••• | ***************** | *************************************** | ••••• | \$N/A | |
| | oo : | | 1 | | | | | | | | Yes | No |
| | e offering pe | | | | | | | | | | | ☒ |
| or sim listed i | ne information illar remuner is an associant broker or detth the information. | ration for so ted person o caler. If mor | licitation of or agent of a re than five (| purchasers i broker or de (5) persons t | n connection aler register | n with sales ed with the | of securities SEC and/or | in the offeri | ing. If a per or states, list | rson to be the name | | |
| Full Name | (Last name | first, if indiv | vidual) | | | | | | | | | |
| Business o | r Residence | Address (N | umber and S | treet, City, S | State, Zip Co | de) | | | | | CA'un | |
| Name of A | ssociated B | roker or Dea | ıler | | | | | | | | | 21840 |
| States in W | Vhich Person | Listed Has | Solicited or | Intends to S | olicit Purchs | nsers | | | * H | | | |
| | "All States | | | | | | •••••••••• | | | | ☐ All S | States |
| [AL] [IL] | [AK] [IN] | [AZ] [IA] | [AR] [KS] | [CA] [KY] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | [FL] [MI] | [GA] [MN] | [HI] [MS] | [ID] [MO] |
| [MT] [RJ] | [NE] [SC] | [NV] [SD] | [NH] [TN] | [NJ] [TX] | [NM] [UT] | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA] [PR] |
| | (Last name | | | [171] | [0.] | [,,] | [1 1 2] | [| [,,,,] | [] | [] | [114] |
| | | | | | | | | | | | | |
| Business o | r Residence | Address (N | umber and S | treet, City, S | State, Zip Co | de) | | | | | | |
| Name of A | ssociated Bi | roker or Dea | aler | | | | | | | | | |
| | hich Person | | | | | | | | | | — All 6 | |
| [AL] | c "All States" [AK] | [AZ] | AR] | (CA) | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | ☐ All 8 [HI] | [ID] |
| [IL] [MT] | [IN] [NE] | [IA] [NV] | [KS] [NH] | [KY] [NJ] | [LA] [NM] | [ME] [NY] | [MD] [NC] | [MA] [ND] | [MI] [OH] | [MN] [OK] | [MS] [OR] | [MO] [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |
| Full Name | (Last name | first, if indiv | vidual) | | | | | | | | | |
| Business o | r Residence | Address (N | umber and S | treet, City, S | State, Zip Co | de) | | | | <u> </u> | | |
| Name of A | ssociated Bi | roker or Dea | aler | | | | | | | | | |
| | Vhich Person ("All States" | | | | | | | | | | ☐ All S | States |
| [AL] [IL] | [AK] [IN] | [AZ] [1A] | [AR] [KS] | [CA] [KY] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | [FL] [MI] | [GA] [MN] | (HI) [MS) | [ID] [MO] |
| [MT] [RI] | [NE] [SC] | [NV] [SD] | [NH] (TN) | [NJ] [TX] | [NM] [UT] | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA] [PR] |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged Aggregate Amount Already Type of Security Offering Price Sold Debt. \$3,000,000 \$1,000,000 ☐ Common ☑ Preferred Convertible Securities (including warrants)..... Partnership Interests \$)..... \$ \$3,000,000 \$1,000,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "non" or "zero." Aggregate Number Dollar Amount Investors of Purchases \$1,000,000 Accredited Investors. -0-\$-0-Non-accredited Investors. \$ Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Type of Offering Security Sold -0-Rule 505 \$-0-Regulation A -0-\$-0--0-\$-0--0-\$-0-4, a. Furnish a state of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate Transfer Agent's Fees. \$ Printing and Engraving Costs..... \$ Legal Fees X \$20,000 Accounting Fees..... S Engineering Fees..... \$ П Sales Commission (specify finders' fees separately)..... \$ Other Expenses (identify) Broker fees. \$ \$20,000

| Enter the difference between the aggregate offering prices expenses furnished in response to Part C – Question 4 issuer.". | | | <u>s</u> : | 2,,980,00 | |
|--|---|----|---|-------------|-----------------------|
| | e issuer used or proposed to be used for each of the purposes ish an estimate and check the box to the left of the estimate. gross proceeds to the issuer set forth in response to Part C – | | | | |
| | | | Paymen Office Directe & Affili | rs, ors | Payments To Others |
| Salaries and fees | | | \$ | □ | <u>s</u> |
| Purchase of real estate | | | \$ | ⊏ | s |
| Purchase, rental or leasing and installation of macl | ninery and equipment | | s | | S |
| Construction or leasing of plan buildings and facil | ities | | s | | s = |
| | ue of securities involved in this offering that may be used in uer pursuant to a merger) | | \$ | | s |
| Repayment of indebtedness | | | \$ | □ | § |
| Working capital | | \$ | 🛛 | \$2,980,000 | |
| Other (specify): | | | \$ | □ | <u> </u> |
| | | | \$ | | s |
| Column Totals | | | \$ | 🗵 | \$2,980,000 |
| Total Payments Listed (column totals added) | | | ☒ | \$2,980,000 |) |
| | D. FEDERAL SIGNATURE | | | _ | |
| | undersigned duly authorized person. If this notice is filed un and Exchange Commission, upon written request of its staff, | | | | |
| Issuer (Print or Type) S | lignature M. Nu | I | Date | | |
| Horizon Food Group, Inc. | Jan 110 Of | | 1/8/ | ده | |
| | itle of Signer (Print or Type) | | | _ | |
| JAMES M. SHORED | / o-Chief Executive Officer | | | | |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STATE SIGNATURE | |
|---|---|---|
| Is any party described in 17 CFR 230.262 pre of such rule? | sently subject to any of the disqualification provisions | Yes No |
| | See Appendix, Column 5, for state respon | nse. |
| The undersigned issuer hereby undertakes to as required by state law. | urnish to any state administrator of any state in which thi | s notice is filed, a notice on Form D (17 CFR 239.500) at such times |
| 3. The undersigned issuer hereby undertakes to | furnish to the state administrators, upon written request, in | nformation furnished by the issuer to offerees. |
| | hich this notice is filed and understands that | t be satisfied to be entitled to the Uniform Limited Offering the issuer claiming the availability of this exemption has |
| The issuer has read this notification and k duly authorized person. | nows the contents to be true and has duly cause | d this notice to be signed on its behalf by the undersigned |
| Issuer (Print or Type) | Signature M A | Date |
| Horizon Food Group, Inc. | Jan 111. 1/M | 1/8/93 |
| Name (Print or Type) | Title (Print or Type) | |
| JAMES M. SHORIN | Co-Chief Executive Officer | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

. . .

| 1 | Intend to non-a investor | to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | Type of investor and amount purchased in State (Part C-Item 2) | | | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | |
|-------|--------------------------------|--|--|--|--------|--|--------|--|----|--|
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | |
| AL | | | | | | | | | | |
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APPENDIX

| _ | | | 3 | | | | | | |
|-------|--------------------------------|--|--|-------------------------|--|--|--------|--|----|
| 1 | Intend to non-a investor | l to sell ccredited s in State -Item 1) | 3 Type of security and aggregate offering price offered in state (Part C-Item 1) | Number of | 4 Type of investor and amount purchased in State (Part C-Item 2) | | | Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | |
| State | Yes | No | | Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| NV | | | | | | | | | |
| NH | | | | | | | | | |
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